

Department of Code Enforcement  
1200 Madison Ave, Suite 100  
Indianapolis, IN 46225  
Phone: (317) 327-4316  
Fax: (317) 327-0817  
New \_\_\_\_\_ Renewal \_\_\_\_\_  
License fee: \$121.00



**APPLICATION FOR**  
**TRANSIENT MERCHANT REGISTRATION**  
**CITY OF INDIANAPOLIS**

Name of applicant: \_\_\_\_\_

Name of business: \_\_\_\_\_

Home address: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Cell phone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Address of property where transient merchant activity will occur: \_\_\_\_\_

\_\_\_\_\_ Zip code: \_\_\_\_\_

Owner of property where transient merchant activity will occur: \_\_\_\_\_

\_\_\_\_\_ Zip code: \_\_\_\_\_

Legal status of business: Individual Proprietor \_\_\_\_\_ Partnership \_\_\_\_\_ LLC \_\_\_\_\_ Corporation \_\_\_\_\_

If Corporation or LLC, list state where incorporated or authorized: \_\_\_\_\_

Resident agent's name: \_\_\_\_\_

Resident agent's address: \_\_\_\_\_ Zip code: \_\_\_\_\_

If Corporation, LLC, or Partnership, list the name and address of each officer, owner, or partner:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been arrested or convicted of a felony or misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, list type of conviction and jurisdiction \_\_\_\_\_

\_\_\_\_\_

**Please indicate that you agree or disagree by marking yes or no to the following:**

1. Licensee agrees to notify the Controller in writing before assigning or transferring the license to any other person (if permitted by ordinance); Yes \_\_\_\_\_ No \_\_\_\_\_
2. Licensee agrees to apply in writing to the Controller before changing the location of the business (if permitted by ordinance); Yes \_\_\_\_\_ No \_\_\_\_\_
3. Licensee agrees to notify the Controller in writing before assigning or transferring the license to any other person. Yes \_\_\_\_\_ No \_\_\_\_\_

The undersigned affirms under penalty for perjury that the answers, representations, and information provided in this application are true.

Signature: \_\_\_\_\_

Name printed: \_\_\_\_\_

Date signed: \_\_\_\_\_